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CONFIRMATION NO. 6509

<b>SERIAL NUMBER</b> 10/695,371	<b>FILING OR 371(c) DATE</b> 10/21/2003 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2616	<b>ATTORNEY DOCKET NO.</b> 04838-075001
<b>APPLICANTS</b> Lawrence W. Yonge III, Ocala, FL; Srinivas Katar, Ocala, FL; Stanley J. Kostoff II, Ocala, FL; William E. Earnshaw, Ocala, FL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/420,071 10/21/2002 and claims benefit of 60/504,733 09/18/2003 <i>Yes</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/22/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 57
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 26161				
<b>TITLE</b> Contention-free access intervals on a CSMA network				
<b>FILING FEE RECEIVED</b> 2666	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	